

11/04/99

1c535 U.S. PTO

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>	Attorney Docket No.	XM-0014
	First Inventor or Application Identifier	P. Marko
	Title	SYSTEM AND METHOD FOR MULTIPPOINT DISTRIBUTION OF SATELLITE DIGITAL AUDIO RADIO SERVICE
	Express Mail Label No.	EL321954451US

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>	5. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification [Total Pages 15] - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure	6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 5]	<b>ACCOMPANYING APPLICATION PARTS</b>
4. Oath or Declaration [Total Pages 3] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee) 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 13. <input type="checkbox"/> * Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired (PTO/SB/09-12) 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input type="checkbox"/> Other: _____
<small>* NOTE FOR ITEMS 1 &amp; 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).</small>	

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:  
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: \_\_\_\_\_  
Prior application information: Examiner \_\_\_\_\_ Group / Art Unit: \_\_\_\_\_  
**For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**17. CORRESPONDENCE ADDRESS**

☐ Customer Number or Bar Code Label \_\_\_\_\_ or ☒ Correspondence address below  
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Name	Benman & Collins				
Address	2049 Century Park East Suite 2740				
City	Los Angeles	State	CA	Zip Code	90067
Country	USA	Telephone	(310) 553-2400	Fax	(310) 553-2675

Name (Print/Type)	William J. Benman	Registration No. (Attorney/Agent)	29,014
Signature	<i>William J. Benman</i>	Date	11/04/99

Certification under 37 CFR 1.10

Express Mail No. EL321954465US

Date of Deposit: November 04, 1999

I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, DC 20231

Name of person mailing application: Yasmin Emerson

Signature of person mailing application: *Y. Emerson*

# FEE TRANSMITTAL for FY 1999

*Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.*

**TOTAL AMOUNT OF PAYMENT** (\$ 904.00)

## Complete if Known

Application Number	
Filing Date	
First Named Inventor	P.D. Marko
Examiner Name	
Group / Art Unit	
Attorney Docket No.	XM-0014

## METHOD OF PAYMENT (check one)

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number   
Deposit Account Name

- ☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

2. ☐ Payment Enclosed:

☐ Check ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)		
101 760	201 380			Utility filing fee	760.00
106 310	206 155			Design filing fee	
107 480	207 240			Plant filing fee	
108 760	208 380			Reissue filing fee	
114 150	214 75			Provisional filing fee	

**SUBTOTAL (1)** (\$ 760.00)

### 2. EXTRA CLAIM FEES

Total Claims	28	-20** =	8	x	18	=	144
Independent Claims	3	-3** =	0	x	78	=	0
Multiple Dependent							

\*\*or number previously paid, if greater; For Reissues, see below

### Large Entity Small Entity

Large Entity		Small Entity		Fee Description
Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	
103 18	203 9			Claims in excess of 20
102 78	202 39			Independent claims in excess of 3
104 260	204 130			Multiple dependent claim, if not paid
109 78	209 39			** Reissue independent claims over original patent
110 18	210 9			** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)** (\$ 144.00)

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)		
105 130	205 65			Surcharge - late filing fee or oath	
127 50	227 25			Surcharge - late provisional filing fee or cover sheet.	
139 130	139 130			Non-English specification	
147 2,520	147 2,520			For filing a request for reexamination	
112 920*	112 920*			Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*			Requesting publication of SIR after Examiner action	
115 110	215 55			Extension for reply within first month	
116 380	216 190			Extension for reply within second month	
117 870	217 435			Extension for reply within third month	
118 1,360	218 680			Extension for reply within fourth month	
128 1,850	228 925			Extension for reply within fifth month	
119 300	219 150			Notice of Appeal	
120 300	220 150			Filing a brief in support of an appeal	
121 260	221 130			Request for oral hearing	
138 1,510	138 1,510			Petition to institute a public use proceeding	
140 110	240 55			Petition to revive - unavoidable	
141 1,210	241 605			Petition to revive - unintentional	
142 1,210	242 605			Utility issue fee (or reissue)	
143 430	243 215			Design issue fee	
144 580	244 290			Plant issue fee	
122 130	122 130			Petitions to the Commissioner	
123 50	123 50			Petitions related to provisional applications	
126 240	126 240			Submission of Information Disclosure Stmt	
581 40	581 40			Recording each patent assignment per property (times number of properties)	
146 760	246 380			Filing a submission after final rejection (37 CFR 1.129(a))	
149 760	249 380			For each additional invention to be examined (37 CFR 1.129(b))	

Other fee (specify) \_\_\_\_\_

Other fee (specify) \_\_\_\_\_

\* Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** (\$ 0.00)

## SUBMITTED BY

Typed or Printed Name **William J. Benman**

Signature *William J. Benman*

Date **11/04/99**

## Complete (if applicable)

Reg. Number **29,014**

Deposit Account User ID

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